

STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

NEW HAMPSHIRE

I. Name of Lobbyist	(s) Molly J. Slingerl	and		DEPARTMENT OF STATE
II. Name of lobbyist	's partnership, firm or co	rporation, if any:		
Altria Client Se	ervices LLC and its Af	filiates		
	me of partnership, firm or cor			
101 Constitution	Avenue - Suite 400W	Washington	DC	20001
Business Address: (S	treet)	(Town/City)	(State)	(Zip Code)
(518) 431-8090	(518)	426-4307	e-mail Molly.J.Sling	gerland@Altria.com
(Telephone)		(Fax)		·
	covers: (Choose one – file transactions which are no			file a separate report for
All reportable trans	nsactions occurring in the r	nonths prior to the re	porting date relative to the	following client:
Altr	ia Client Services LLC	and its Affiliates		
OD	(Full Name of Client as it a	ppears on the Lobbyist	Registration Form)	
OR ☐ All reportable tranunrelated to any parti		cluding the lobbyist	s family), or the lobbying	firm listed below which are
IV. Date of Report	April 26, 2017		July 26, 2017	
Reports cover: acti	vity from date of registration	to 3/31/17 act	ivity from 4/1/17 to 6/30/17	
	October 25, 2017 activity from 7/1/17 to 9/30/	17 ac	January 31, 2018 ☐ <i>livity from 10/1/17 to 12/31/1</i>	7
	n no fees received and i complete just this form an			
VI_Check if addition	nal reports are attached:			
If you have recei	ved fees or made expenditu	res, you must file Ac	dendum A- Fees and Exp	penses
☐ If you have paid a Expense Reimbursem	an honorarium or reimburs nent	ed expenses, you mu	st file Addendum B Repo	ort of Honorariums or
If you, your firm	, or your family has made p	olitical contributions	, you must file Addendun	n C- Political Contributions
I have read RSA 15,	ffirmation by Lobbyist RSA 15-B, RSA 14-C and best of my knowledge and b		swear or affirm that the fo	regoing information is true
Mohn A.	Think	- 1	October 9, 2017	
(Signature of lobbyis	st) /		(Date)
Molly J. Slinger (Print Name of lobby				

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Molly J. Slingerland	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Altria Client Services LLC and its Affiliates	
(Name of partnership, firm or corporation) Altria Client Services LLC and its Affiliates-Philip Morris USA,	
III. Name of Client John Middleton Co., US Smokeless Tobacco Co., NuMark LLC	Date October 9, 2017
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses: a) Total of all fees received in this reporting period	relations, or public relations service
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ <u>35,333.23</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>38,314.05</u>
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>0.00</u>
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a busines as than \$10 that is given to the person and with a value of \$25.00 or less); and porting period of greater than \$25.00 for use of greater than \$25, purchase of the er than \$25, but not greater than \$50 per expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$ _2,681.77
in a), of \$25 or less.	b) \$6.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$ 293.05

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ 2,980.82
	25 222 22
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ _35,333.23
f) Total of all expenses year to date	f) \$ <u>38,314.05</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
American Airlines (Flight from LaGuardia to Manchester, NH Airport)	s 159.15
Hertz Car Rental	\$ 133.90
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	that the foregoing information
(Signature of llobby ist)	October 9, 2017
(Signature of lobbyist)	(Date)
Molly J. Slingerland	
(Print Name of lobbyist)	



STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s) _	Molly J. Slingerland		
II. Name of lobbyist's p	artnership, firm or cor	rporation, if any:	
Altria Client Service	es LLC and its Affiliat	es	
	partnership, firm or corporation)		
III. Name of Client <u>Al</u>	tria Client Services an	d its Affiliates	Date October 9, 2017
Political Contributions For each political contri client/lobbyist and lobby	bution that is reportable	pursuant to RSA Chap llowing:	oter 664 paid on behalf of the
Full name of candidate:	Sununu	Chris	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$	1,000.00	Office Candidate i	s Seeking Governor
Full name of candidate:	Sanborn	Andy	
	(Last Name)	(First Name)	(Middle Name/Initial)
Amount of contribution \$ _	\$500.00	Office Candidate is	Seeking State Senate
			ds or services provided, and enter the
		ve for amount of contrib	ution. If the actual cost is not known
Full name of candidate:	d the word "estimate."		
Full name of candidate:		(First Name)	(Middle Name/Initial)

If the contribution is an in-kind contribution, provide a descripti actual cost of the in-kind contribution on the line above for amo	on of the goods or services provided, and enter the unt of contribution. If the actual cost is not known
enter an estimated value and the word "estimate."	
(If more than three contributions were made, report additional contribu	tions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby is true and complete to the best of my knowledge and believed.	
Moly J. Surn	October 9, 2017
(Signature of lobbyist)	(Date)
Molly J. Slingerland	
(Print Name of lobbyist)	